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## \*\* CONTINUING DATA \*\*\*\*\*

*x/one*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

JAPAN 2002-271947 09/18/2002

*JK*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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## TITLE

Medical manipulator

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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